Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
MOVEON.ORG POLÍTICAL ACTION					
	C C00341396				
Check if X 24-hour report 48-hour report New report Amends report	rt filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
Chong & Koster	M = M / D = D / Y = Y = Y				
Mailing Address 1244 19th St. NW	10 04 2016				
	Amount				
City State Zip Code	1000.00				
Washington DC 20036	Transaction ID : SE.11345 Date of Disbursement or Obligation				
Purpose of Expenditure Online Advertising Category/	Mam / Dad / Yayayay				
Online Advertising Type	10 04 2016				
Name of Federal Candidate Support	Office Sought: House District: 00				
RUBIO, MARCO, , ,	President X Senate State: FL				
Calendar Year-To-Date	Disbursement For: Primary				
Per Election for Office Sought 2378.83	2016 Other (specify) ▶				
Full Name of Payee Chong & Koster	Date of Public Distribution/Dissemination				
Chong & Nosiei	10 03 2016				
Mailing Address 1244 19th St. NW	Amount				
City State Zip Code Washington DC 20036	1000.00 Transaction ID : SE.11346				
	Date of Disbursement or Obligation				
Purpose of Expenditure Online Advertising Category/ Type	10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Foderal Condidate					
DUDIO MADOO	Office Sought: House District: 00				
ROBIO, MARCO, , , Oppose	President A Seriale State.				
Calendar Year-To-Date Per Election for Office Sought 1357.83	Disbursement For: Primary Seneral 2016				
	Other (specify) -				
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00				
(,)	7 200000				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Matzzie, Tom, , ,	M = M / D = D / Y = Y = Y				
[Electronically Filed] Date Signature	10 21 2016				
					

	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
MOVEON.ORG POLITICAL ACTION	C C00341396			
Check if 24-hour report 48-hour report New report Amends	report filed on/			
Full Name of Payee	Date of Public Distribution/Dissemination			
Chong & Koster	10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1244 19th St. NW	Amount			
City State Zip Code	500.00			
Washington DC 20036	Transaction ID : SE.11347 Date of Disbursement or Obligation			
Purpose of Expenditure Online Advertising Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Suppor	rt Office Sought: House District: 00			
RUBIO, MARCO, , ,				
Calendar Year-To-Date Per Election for Office Sought 7548.97	Disbursement For: Primary General 2016 Other (specify) ▶			
Full Name of Payee Chong & Koster	Date of Public Distribution/Dissemination			
Mailing Addyses	10 12 2016			
Mailing Address 1244 19th St. NW	Amount			
City State Zip Code	1250.00			
Washington DC 20036	Transaction ID : SE.11348 Date of Disbursement or Obligation			
Purpose of Expenditure Online Advertising Category/ Type	10 12 2016			
Name of Federal Candidate Suppo	rt Office Sought: House District: 00			
RUBIO, MARCO, , , Oppos	e President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought 8798.97	Disbursement For: Primary General Other (specify) General			
(a) SUBTOTAL of Itemized Independent Expenditures	1750.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	······ >			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Matzzie, Tom, , , [Electronically Filed]	Date 10 21 2016			
Signature				

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	NDITONES	PAGE 3 OF 6 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼				
MOVEON.ORG POLITICAL ACTION	C C00341396					
Check if X 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee Columbia Road Media		Date of Public Distribution/Dissemination				
Mailing Address PO Box 53335		10 13 2016 Amount				
City State Washington DC	Zip Code 20009	41.61 Transaction ID : SE.11349				
Purpose of Expenditure Internet Advertising	Category/	Date of Disbursement or Obligation				
Name of Federal Candidate		ce Sought: House District: 00				
RUBIO, MARCO, , , Calendar Year-To-Date		President				
Per Election for Office Sought Full Name of Payee	8840.58	Other (specify) Date of Public Distribution/Dissemination				
Columbia Road Media		10 13 2016				
Mailing Address PO Box 53335		Amount				
City State Washington DC	Zip Code 20009	41.61 Transaction ID : SE.11350 Date of Disbursement or Obligation				
Purpose of Expenditure Internet Advertising	Category/ Type	10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate RUBIO, MARCO, , ,	Support Offi	ce Sought: House District: 00 President Senate State: FL				
Calendar Year-To-Date Per Election for Office Sought		bursement For: Primary X General				
(a) SUBTOTAL of Itemized Independent Expenditures	·····	83.22				
(b) SUBTOTAL of Unitemized Independent Expenditures	······					
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Matzzie, Tom, , , [Electrical Signature	tronically Filed] Date	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION C C00341396 Check if 24-hour report	YYY			
Check if 24-hour report 48-hour report New report Amends report filed on Full Name of Payee Facebook Date of Public Distribution/Dist	YYY			
Check if 24-hour report 48-hour report New report Amends report filed on Full Name of Payee Facebook Date of Public Distribution/Dis	TY TY TY			
Facebook Pacebook	YYY			
M = M / D = D / Y				
10 03				
Mailing Address 1601 Willow Rd Amount				
City State Zip Code	21.00			
Menlo Park CA 94025 Transaction ID : SE.11351 Date of Disbursement or Oblig	Transaction ID : SE.11351			
Purpose of Expenditure	2016			
Name of Federal Candidate Support Office Sought: House Dist	trict: 00			
RUBIO MARCO	tate: FL			
Calendar Year-To-Date Per Election for Office Sought Disbursement For: □ Primary 2016 Other (specify) ▶	✗ General			
Full Name of Payee Date of Public Distribution/Dis	semination			
Facebook ———————	2016			
Mailing Address 1601 Willow Rd Amount	2010			
City State Zip Code	1000.00			
Menlo Park CA 94025 Transaction ID : SE.11343 Date of Disbursement or Oblig	gation			
Purpose of Expenditure Online Advertising Category/ Type Type	2016			
Name of Federal Candidate X Support Office Sought: House Dis	trict: 00			
MIDDLY DATRICKE	tate: FL			
Calendar Year-To-Date Per Election for Office Sought Disbursement For: □ Primary 2016 □ Other (specify) ▶	X General			
	1021.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	1.00			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Matzzie, Tom, , , [Electronically Filed] Date 10 21 2016	Y			
Signature				

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	include Ly	FOR SE OF FORM 24/48			
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
IV	OVEON.ORG POLITICAL ACTION	C C00341396			
Ch	eck if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y Y			
	Full Name of Payee	Date of Public Distribution/Dissemination			
	PDQ Printing	10 07 2016			
	Mailing Address 3820 S Valley View Blvd	Amount			
	City State Zip Code	4330.14			
	Las Vegas NV 89103	Transaction ID : SE.11352 Date of Disbursement or Obligation			
	Purpose of Expenditure Literature Category/ Type	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Name of Federal Candidate Support Office	e Sought: House District: 00			
	MURPHY, PATRICK E, , , Oppose	President State: FL			
	Calcificat To Bato	ursement For: Primary General			
	Per Election for Office Sought 6708.97 2016	Other (specify) ▶			
	Full Name of Payee Premium Beat	Date of Public Distribution/Dissemination			
	Mailing Address 4398 St-Laurent	10 03 2016			
	4398 St-Laurent	Amount			
	City State Zip Code	24.50			
	Montreal ZZ	Transaction ID : SE.11353 Date of Disbursement or Obligation			
	Purpose of Expenditure Ad Production Category/ Type	10 D D Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z			
	Name of Federal Candidate Support Office	e Sought: House District: 00			
	RUBIO, MARCO, , ,	President State: FL Senate			
	Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary General Other (specify)			
	(a) SUBTOTAL of Itemized Independent Expenditures	4354.64			
	(b) SUBTOTAL of Unitemized Independent Expenditures				
	(c) TOTAL Independent Expenditures				
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
		0 21 2016			
	Signature				
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	Siledule Ly			FOR SE OF	FORM 24/48	
NA N	ME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION		FEC I	DENTIFICATI	ON NUMBER ▼	
IV	MOVEON.ORG POLITICAL ACTION		С	C00341396		
Ch	neck if X 24-hour report 48-hour report New report Amends report		и = м	/ D D /	Y Y Y Y Y	
	Full Name of Payee	Date	of Publ	ic Distribution	/Dissemination	
	Solidarity Strategies LLC		10 07 2016			
	Mailing Address 1090 Vermont Ave, NW	Amo	unt			
	Suite 300		-		1 1	
	City State Zip Code Washington DC 20005		340.00 Transaction ID : SE.11354 Date of Disbursement or Obligation			
	Purpose of Expenditure Literature Category/ Type		10 M	07	2016	
	Name of Federal Candidate	Office Soug	nt:	House	District:00	
	MURPHY, PATRICK E, , ,	Presid	lent	X Senate	State: FL	
	Galerida Tear to Bate	Disburseme	nt For:	Primary	General	
	Per Election for Office Sought 7048.97	2016	Other (s	pecify) 🕨		
	Full Name of Payee TCN, Inc.	_	of Pub	lic Distribution	/Dissemination	
	Mailing Address 560 South Vallie View Drive	Amo	09 unt	29	2016	
	City State Zip Code	$-\Gamma$			333.33	
	St George UT 84770			ID: SE.11344 oursement or	Obligation	
	Purpose of Expenditure Phone Calls Category/ Type		10 M	01	2016	
	Name of Federal Candidate	Office Soug	ht:	House	District:00	
	MURPHY, PATRICK E, , ,	Presid	dent	X Senate	State: FL	
		Disburseme 2016		Primary	/ X General	
	(a) SUBTOTAL of Itemized Independent Expenditures	· [.	-	7	673.33	
	(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures	· [7	9882.19	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Matzzie, Tom, , , [Electronically Filed] Date	10	21	20	Y Y 16	
	Signature					

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